

CASE NUMBER: \_\_\_\_\_

**Form 2-A  
COVER SHEET**

For Period Ending \_\_\_\_\_

**Accounting Method:** ☐ Accrual Basis ☐ Cash Basis

**THIS REPORT IS DUE 15 DAYS AFTER THE END OF THE MONTH**

Mark One Box for Each  
Required Document:

Debtor must attach each of the following reports/documents unless the U. S. Trustee has waived the requirement in writing. File the original with the Clerk of Court. Submit a duplicate, with original signature, to the U. S. Trustee.

Report/Document Attached	Previously Waived	REQUIRED REPORTS/DOCUMENTS
<input type="checkbox"/>	<input type="checkbox"/>	1. Cash Receipts and Disbursements Statement (Form 2-B)
<input type="checkbox"/>	<input type="checkbox"/>	2. Balance Sheet (Form 2-C)
<input type="checkbox"/>	<input type="checkbox"/>	3. Profit and Loss Statement (Form 2-D)
<input type="checkbox"/>	<input type="checkbox"/>	4. Supporting Schedules (Form 2-E)
<input type="checkbox"/>	<input type="checkbox"/>	5. Quarterly Fee Summary (Form 2-F)
<input type="checkbox"/>	<input type="checkbox"/>	6. Narrative (Form 2-G)
<input type="checkbox"/>	<input type="checkbox"/>	7. Bank Statements for All Bank Accounts
<input type="checkbox"/>	<input type="checkbox"/>	8. Bank Statement Reconciliations for all Bank Accounts

***I declare under penalty of perjury that the following Monthly Operating Report, and any attachments thereto are true, accurate and correct to the best of my knowledge and belief.***

Executed on: \_\_\_\_\_

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Form 2-A

**Form 2-B**  
**CASH RECEIPTS AND DISBURSEMENTS STATEMENT**

For Period: \_\_\_\_\_ to \_\_\_\_\_

**CASH FLOW SUMMARY**

	Current Month	Accumulated
<b>1. Beginning Cash Balance</b>	\$ _____ (1)	\$ _____ (1)
<b>2. Cash Receipts</b>		
Operations	_____	_____
Sale of Assets	_____	_____
Loans/advances	_____	_____
Other	_____	_____
Total Cash Receipts	\$ _____	\$ _____
<b>3. Cash Disbursements</b>		
Operations	_____	_____
Debt Service/Secured loan payment	_____	_____
Professional fees/U.S. Trustee fees	_____	_____
Other	_____	_____
Total Cash Disbursements	\$ _____	\$ _____
<b>4. Net Cash Flow (Total Cash Receipts less     Total Cash Disbursements)</b>	_____	_____
<b>5. Ending Cash Balance (to Form 2-C)</b>	\$ _____ (2)	\$ _____ (2)

**CASH BALANCE SUMMARY**

	Financial Institution	Book Balance
Petty Cash	_____	\$ _____
DIP Operating Account	_____	_____
DIP State Tax Account	_____	_____
DIP Payroll Account	_____	_____
Other Operating Account	_____	_____
Other Interest-bearing Account	_____	_____
TOTAL (must agree with Ending Cash Balance above)		\$ _____ (2)

**(1) Accumulated beginning cash balance is the cash available at the commencement of the case.**

**Current month beginning cash balance should equal the previous month's ending balance.**

**(2) All cash balances should be the same.**

For Period: \_\_\_\_\_ to \_\_\_\_\_

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[illegible]

\$ \_\_\_\_\_ (1)

Revised 6/1/2006

For Period: \_\_\_\_\_ to \_\_\_\_\_

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**(1) Total for all accounts should agree with total cash disbursements listed on Form 2-B, page 1**  
Attach additional sheets as necessary

# COMPARATIVE BALANCE SHEET

For Period Ended: \_\_\_\_\_

Current  
Month

Petition  
Date (1)

## ASSETS

### Current Assets:

Cash (from Form 2-B, line 5)	\$ _____	\$ _____
Accounts Receivable (from Form 2-E)	_____	_____
Receivable from Officers, Employees, Affiliates	_____	_____
Inventory	_____	_____
Other Current Assets :(List) _____	_____	_____
_____	_____	_____
Total Current Assets	\$ _____	\$ _____

### Fixed Assets:

Land	\$ _____	\$ _____
Building	_____	_____
Equipment, Furniture and Fixtures	_____	_____
Total Fixed Assets	_____	_____
Less: Accumulated Depreciation	( _____ )	( _____ )
Net Fixed Assets	\$ _____	\$ _____

Other Assets (List): _____	_____	_____
_____	_____	_____
<b>TOTAL ASSETS</b>	\$ _____	\$ _____

## LIABILITIES

Post-petition Accounts Payable (from Form 2-E)	\$ _____	\$ _____
Post-petition Accrued Professional Fees (from Form 2-E)	_____	_____
Post-petition Taxes Payable (from Form 2-E)	_____	_____
Post-petition Notes Payable	_____	_____
Other Post-petition Payable(List): _____	_____	_____
_____	_____	_____
Total Post Petition Liabilities	\$ _____	\$ _____

### Pre Petition Liabilities:

Secured Debt	_____	_____
Priority Debt	_____	_____
Unsecured Debt	_____	_____
Total Pre Petition Liabilities	\$ _____	\$ _____
<b>TOTAL LIABILITIES</b>	\$ _____	\$ _____

Owner's/Stockholder's Equity	\$ _____	\$ _____
Retained Earnings - Post-petition	_____	_____
<b>TOTAL OWNERS' EQUITY</b>	\$ _____	\$ _____
<b>TOTAL LIABILITIES AND OWNERS' EQUITY</b>	\$ _____	\$ _____

(1) Petition date values are taken from the Debtor's balance sheet as of the petition date or are the values listed on the Debtor's schedules.

**Form 2-D**  
**PROFIT AND LOSS STATEMENT**  
For Period \_\_\_\_\_ to \_\_\_\_\_

	Current Month <u>Month</u>	Accumulated Total (1) <u>Total (1)</u>
Gross Operating Revenue	\$ _____	\$ _____
Less: Discounts, Returns and Allowances	( _____ )	( _____ )
<b>Net Operating Revenue</b>	<b>\$ _____</b>	<b>\$ _____</b>
Cost of Goods Sold	_____	_____
<b>Gross Profit</b>	<b>\$ _____</b>	<b>\$ _____</b>
Operating Expenses		
Officer Compensation	\$ _____	\$ _____
Selling, General and Administrative	_____	_____
Rents and Leases	_____	_____
Depreciation, Depletion and Amortization	_____	_____
Other (list): _____	_____	_____
_____	_____	_____
Total Operating Expenses	\$ _____	\$ _____
<b>Operating Income (Loss)</b>	<b>\$ _____</b>	<b>\$ _____</b>
Non-Operating Income and Expenses		
Other Non-Operating Expenses	\$ _____	\$ _____
Gains (Losses) on Sale of Assets	_____	_____
Interest Income	_____	_____
Interest Expense	_____	_____
Other Non-Operating Income	_____	_____
Net Non-Operating Income or (Expenses)	\$ _____	\$ _____
Reorganization Expenses		
Legal and Professional Fees	\$ _____	\$ _____
Other Reorganization Expense	_____	_____
Total Reorganization Expenses	\$ _____	\$ _____
<b>Net Income (Loss) Before Income Taxes</b>	<b>\$ _____</b>	<b>\$ _____</b>
Federal and State Income Tax Expense (Benefit)	_____	_____

**Form 2-E**  
**SUPPORTING SCHEDULES**  
For Period: \_\_\_\_\_ to \_\_\_\_\_

**POST PETITION TAXES PAYABLE SCHEDULE**

	<u>Beginning Balance (1)</u>	<u>Amount Accrued</u>	<u>Amount Paid</u>	<u>Date Paid</u>	<u>Check Number</u>	<u>Ending Balance</u>
Income Tax Withheld:						
Federal	\$ _____	\$ _____	\$ _____	_____	_____	\$ _____
State	_____	_____	_____	_____	_____	_____
FICA Tax Withheld	_____	_____	_____	_____	_____	_____
Employer's FICA Tax	_____	_____	_____	_____	_____	_____
Unemployment Tax						
Federal	_____	_____	_____	_____	_____	_____
State	_____	_____	_____	_____	_____	_____
Sales, Use & Excise Taxes	_____	_____	_____	_____	_____	_____
Property Taxes	_____	_____	_____	_____	_____	_____
Accrued Income Tax:						
Federal	_____	_____	_____	_____	_____	_____
State	_____	_____	_____	_____	_____	_____
Other: _____	_____	_____	_____	_____	_____	_____
<b>TOTALS</b>	<b>\$ _____</b>	<b>\$ _____</b>	<b>\$ _____</b>			<b>\$ _____</b>

(1) For first report, Beginning Balance will be \$0; thereafter, Beginning Balance will be Ending Balance from prior report.


**INSURANCE SCHEDULE**

	<u>Carrier</u>	<u>Amount of Coverage</u>	<u>Expiration Date</u>	<u>Premium Paid Through</u>
Workers' Compensation	_____	\$ _____	_____	_____
General Liability	_____	\$ _____	_____	_____
Property (Fire, Theft)	_____	\$ _____	_____	_____
Vehicle	_____	\$ _____	_____	_____
Other (list):	_____	\$ _____	_____	_____
	_____	\$ _____	_____	_____

**Form 2-E  
SUPPORTING SCHEDULES**

For Period: \_\_\_\_\_ to \_\_\_\_\_

**ACCOUNTS RECEIVABLE AND POST PETITION PAYABLE AGING**

<b><u>Due</u></b>	<b><u>Accounts Receivable</u></b>	<b><u>Post Petition Accounts Pa</u></b>
Under 30 days	\$ _____	\$ _____
30 to 60 days	_____	_____
61 to 90 days	_____	_____
91 to 120 days	_____	_____
Over 120 days	_____	_____
<b>Total Post Petition</b>	_____	
<b>Pre Petition Amounts</b>	_____	
Total Accounts Receivable	\$ _____	
Less: Bad Debt Reserve	_____	
<b>Net Accounts Receivable (to Form 2-C)</b>	\$ _____	
	<b>Total Post Petition Accounts Payable</b>	\$ _____

*\* Attach a detail listing of accounts receivable and post-petition accounts payable*

**SCHEDULE OF PAYMENTS TO ATTORNEYS AND OTHER PROFESSIONALS**

	<b><u>Month-end Retainer Balance</u></b>	<b><u>Current Month's Accrual</u></b>	<b><u>Paid in Current Month</u></b>	<b><u>Date of Court Approval</u></b>	<b><u>Month-end Balance Due *</u></b>
Debtor's Counsel	\$ _____	\$ _____	\$ _____	_____	\$ _____
Counsel for Unsecured Creditors' Committee	_____	_____	_____	_____	_____
Trustee's Counsel	_____	_____	_____	_____	_____
Accountant	_____	_____	_____	_____	_____
Other: _____	_____	_____	_____	_____	_____
<b>Total</b>	\$ _____	\$ _____	\$ _____		\$ _____

\*Balance due to include fees and expenses incurred but not yet paid.

**SCHEDULE OF PAYMENTS AND TRANSFERS TO PRINCIPALS/EXECUTIVES\*\***

<b><u>Payee Name</u></b>	<b><u>Position</u></b>	<b><u>Nature of Payment</u></b>	<b><u>Amount</u></b>
_____	_____	_____	\$ _____
_____	_____	_____	_____

\*\*List payments and transfers of any kind and in any form made to or for the benefit of any proprietor, owner, partner, shareholder, officer or director.

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Form 2-E



**Form 2-F**  
**QUARTERLY FEE SUMMARY \***  
**For the Month Ended:** \_\_\_\_\_

<u>Month</u>	<u>Year</u>	<u>Cash Disbursements **</u>	<u>Quarterly Fee Due</u>	<u>Check No.</u>	<u>Date Paid</u>
January	_____	\$ _____			
February	_____	_____			
March	_____	_____			
TOTAL 1st Quarter		\$ _____	\$ _____	_____	_____
April	_____	\$ _____			
May	_____	_____			
June	_____	_____			
TOTAL 2nd Quarter		\$ _____	\$ _____	_____	_____
July	_____	\$ _____			
August	_____	_____			
September	_____	_____			
TOTAL 3rd Quarter		\$ _____	\$ _____	_____	_____
October	_____	\$ _____			
November	_____	_____			
December	_____	_____			
TOTAL 4th Quarter		\$ _____	\$ _____	_____	_____

**FEE SCHEDULE**

<u>Quarterly Disbursements</u>	<u>Fee</u>	<u>Quarterly Disbursements</u>	<u>Fee</u>
\$0 to \$14,999.....	\$250	\$300,000 to \$999,999.....	\$3,750
\$15,000 to \$74,999.....	\$500	\$1,000,000 to \$1,999,999.....	\$5,000
\$75,000 to \$149,999.....	\$750	\$2,000,000 to \$2,999,999.....	\$7,500
\$150,000 to \$224,999.....	\$1,250	\$3,000,000 to \$4,999,999.....	\$8,000
\$225,000 to \$299,999.....	\$1,500	\$5,000,000 and above.....	\$10,000

\* This summary is to reflect the current calendar year's information cumulative to the end of the reporting period

\*\* Should agree with line 3, Form 2-B. Disbursements are net of transfers to other debtor in possession bank accounts

Please provide a brief description of any significant business and legal actions taken by the debtor, its creditors, or the court during the reporting period, any unusual or non-recurring accounting transactions that are reported in the financial statements, and any significant changes in the financial condition of the debtor which have occurred subsequent to the report date.

[illegible]